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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing **OR** Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

Attorney Docket Number	576P092
First Named Inventor	Daisaku Matsunaga <i>COMPLETE IF KNOWN</i>
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MICROPATTERN RETARDATION ELEMENT

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 03/29/2005 as United States Application Number or PCT International

Application Number PCT/JP2005/005848 and was amended on (MM/DD/YYYY) [redacted] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date

Information for Prior Foreign Application(s)					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
2004-099122	JP	03/30/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. [Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. VIA FAX OR EMAIL.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> The address associated with Customer Number: 		OR <input checked="" type="checkbox"/> Correspondence address below
Name Kevin S. Lemack		
Address Nields & Lemack 176 E. Main Street - Suite 8		
City Westboro	State MA	ZIP 01581
Country U.S.A.	Telephone (508) 898-1818	Fax (508) 898-2020
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.		
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor		
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NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor		
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Inventor's Signature <i>Masanori Hashimoto</i>		Date <i>Aug 1, 2006</i>
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City Koshigaya-shi	State Saitama	Zip 3430041
Country JAPAN		
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.		

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Mailing Address			
City	State	Zip	Country

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If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.